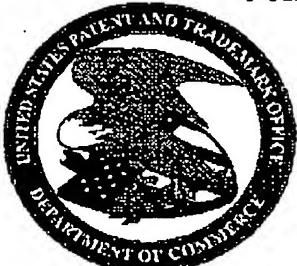


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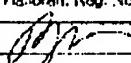
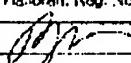
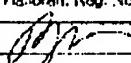
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<p>Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.</p> <table border="1"> <tr> <td colspan="2">Application Number</td> <td colspan="2">10/735,084</td> </tr> <tr> <td colspan="2">Filing Date</td> <td colspan="2">12/12/2003</td> </tr> <tr> <td colspan="2">First Named Inventor</td> <td colspan="2">Barbati, V</td> </tr> <tr> <td colspan="2">Group Art Unit</td> <td colspan="2">1648</td> </tr> <tr> <td colspan="2">Promoter Name</td> <td colspan="2">Suzzy Brown Chen</td> </tr> <tr> <td colspan="2">Adams Cockle Number</td> <td colspan="2">A91-02-14-US</td> </tr> <tr> <td colspan="6"> ENCLOSURES (check all that apply) </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Non-transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Assignment/Reply <input type="checkbox"/> After Fina <input type="checkbox"/> Affidavit/Declaration(s) <input type="checkbox"/> Declaration of True Identity <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Demand Letter or Petition <input type="checkbox"/> Response to Missing Part(s) <input type="checkbox"/> Response to Missing P.A. & Under 37 CFR 1.121 or 1.122 </td> <td colspan="2"> <input type="checkbox"/> Assignment Process <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing/Interest Request <input type="checkbox"/> Motion <input type="checkbox"/> Motion to Decline to be Represented <input type="checkbox"/> Power of Attorney, Authorization <input type="checkbox"/> Change of Address <input type="checkbox"/> Transfer/Assignment <input type="checkbox"/> Request for Refund <input type="checkbox"/> CO Number of CTR(s) </td> <td colspan="2"> <input type="checkbox"/> After Adverse Office Action <input type="checkbox"/> Appeal Communication to Agent <input type="checkbox"/> Appeal Communication to Office <input type="checkbox"/> Appeal Communication to Office <input type="checkbox"/> Other <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Data Sheet <input checked="" type="checkbox"/> Other (please specify) <input type="checkbox"/> Problem under 37 CFR 1.107(b) </td> </tr> <tr> <td colspan="6"> Remarks Submitted via facsimile to 271-273-8300 </td> </tr> <tr> <td colspan="6"> SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT </td> </tr> <tr> <td colspan="2"> Firm/ Individual Name Signature Date </td> <td colspan="4"> Patrick J. Halloran, Reg. No. 41,050  08/04/2006 </td> </tr> <tr> <td colspan="6"> CERTIFICATE OF MAILING </td> </tr> <tr> <td colspan="6"> I hereby certify that this document is being deposited with the United States Patent and Trademark Office with sufficient postage pre-paid in an envelope addressed to Commissioner for Patents Washington, D.C. 20231 on the date _____. </td> </tr> <tr> <td colspan="2"> Type or print name Signature </td> <td colspan="4"></td> </tr> </table>						Application Number		10/735,084		Filing Date		12/12/2003		First Named Inventor		Barbati, V		Group Art Unit		1648		Promoter Name		Suzzy Brown Chen		Adams Cockle Number		A91-02-14-US		ENCLOSURES (check all that apply)						<input type="checkbox"/> Non-transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Assignment/Reply <input type="checkbox"/> After Fina <input type="checkbox"/> Affidavit/Declaration(s) <input type="checkbox"/> Declaration of True Identity <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Demand Letter or Petition <input type="checkbox"/> Response to Missing Part(s) <input type="checkbox"/> Response to Missing P.A. & Under 37 CFR 1.121 or 1.122		<input type="checkbox"/> Assignment Process <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing/Interest Request <input type="checkbox"/> Motion <input type="checkbox"/> Motion to Decline to be Represented <input type="checkbox"/> Power of Attorney, Authorization <input type="checkbox"/> Change of Address <input type="checkbox"/> Transfer/Assignment <input type="checkbox"/> Request for Refund <input type="checkbox"/> CO Number of CTR(s)		<input type="checkbox"/> After Adverse Office Action <input type="checkbox"/> Appeal Communication to Agent <input type="checkbox"/> Appeal Communication to Office <input type="checkbox"/> Appeal Communication to Office <input type="checkbox"/> Other <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Data Sheet <input checked="" type="checkbox"/> Other (please specify) <input type="checkbox"/> Problem under 37 CFR 1.107(b)		Remarks Submitted via facsimile to 271-273-8300						SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						Firm/ Individual Name Signature Date		Patrick J. 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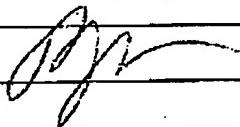
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		Application Number	10/735,064
		Filing Date	12/12/2003
		First Named Inventor	Barban, V.
		Group Art Unit	1648
		Examiner Name	Stacy Brown Chen
Total Number of Pages in This Submission	12	Attorney Docket Number	API-02-14-US

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<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Patrick J. Halloran, Reg. No. 41,053
Signature	
Date	08/04/2006

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PATENT
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
(Case No. API-02-14-US)

In The Application of:)
Barban, et al.)
Serial No.: 10/735,064) Examiner: Stacy Brown Chen
Filed: 12 DEC 2003) Art Unit: 1648
For: PRODUCTION OF ALVAC ON AVIAN)
EMBRYONIC STEM CELLS.)

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P.O. Box 1450
Alexandria, VA 22313-1450

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RESPONSE TO OFFICE ACTION DATED 27 SEPT 2005

Dear Sir,

This is a response to the Office Action dated September 27, 2005. Attached herewith are: 1) Transmittal letter; and, 2) Petition for Revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b). Applicants hereby make any additionally required petitions and authorize the Commissioner to deduct all fees required with this response from Deposit Account No. 500715.

Amendments to the Claims begins on page 2 of this response.

Remarks begin on page 6 of this response.

Conclusions are found on page 8 of this response.